

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000000713

FILED
Apr 30, 2003
Secretary of State

Entity Name: FIRST LADY C WOMEN MINISTRIES, INCORPORATED

Current Principal Place of Business:

4311 NW 25 PLACE
LAUDERHILL, FL 33313

New Principal Place of Business:

Current Mailing Address:

4311 NW 25 PLACE
LAUDERHILL, FL 33313

New Mailing Address:

FEI Number: 02-0546971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARPENTER, SHARI
4311 NW 25 PLACE
LAUDERHILL, FL 33313

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARPENTER, SHARI
Address: 4200 NW 16TH STREET #602
City-St-Zip: LAUDERHILL, FL 33313

Title: V () Delete
Name: LEWIS, MARY M ESQ.
Address: 4200 NW 16TH STREET #602
City-St-Zip: LAUDERHILL, FL 33313

Title: S () Delete
Name: EDWARDS, ALTHEA
Address: 3520 WEST BROWARD BLVD. #210
City-St-Zip: FORT LAUDERDALE, FL 33312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CARPENTER, SHARI
Address: 4200 NW 16TH STREET #602
City-St-Zip: LAUDERHILL, FL 33313

Title: D (X) Change () Addition
Name: LEWIS, MARY M ESQ.
Address: 4200 NW 16TH STREET #602
City-St-Zip: LAUDERHILL, FL 33313

Title: D (X) Change () Addition
Name: EDWARDS, ALTHEA
Address: 3520 WEST BROWARD BLVD. #210
City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHARI CARPENTER

P

04/30/2003

Electronic Signature of Signing Officer or Director

_____ Date